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|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------------|
| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>CONCERNING A SUBMISSION UNDER 35 U.S.C. 371</b> |                                           | ATTORNEY'S DOCKET NUMBER<br>U1927.0014                                              |
|                                                                                                                                         |                                           | U.S. APPLICATION No. (known, see 37 CFR 1.5)<br>To be assigned.<br><b>107518602</b> |
| INTERNATIONAL APPLICATION NO.<br>PCT/JP03/07676                                                                                         | INTERNATIONAL FILING DATE<br>17 June 2003 | PRIORITY DATE CLAIMED<br>17 June 2002                                               |
| TITLE OF INVENTION SEMICONDUCTOR DEVICE HAVING SCHOTTKY JUNCTION ELECTRODE                                                              |                                           |                                                                                     |
| APPLICANT(S) FOR DO/EO/US Yuji Ando et al.                                                                                              |                                           |                                                                                     |

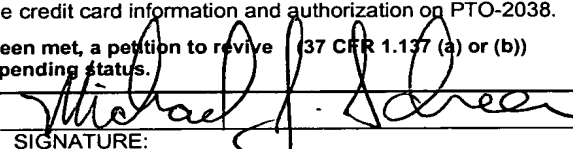
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

- ☒ This is a **FIRST** submission of items concerning a submission under 35 U.S.C. 371.
- ☐ This is a **SECOND** or **SUBSEQUENT** submission of items concerning a submission under 35 U.S.C. 371.
- ☐ This is an express request to begin national examination procedures (35 U.S.C. 371 (f)). The submission must include items (5), (6), (9) and (21) indicated below.
- ☐ The US has been elected (Article 31).
- ☒ A copy of the International Application as filed (35 U.S.C. 371 (c)(2))
  - ☒ is attached hereto (required only if not communicated by the International Bureau).
  - ☐ has been communicated by the International Bureau.
  - ☐ is not required, as the application was filed in the United States Receiving Office (RO/US).
- ☒ An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)).
  - ☒ is attached hereto.
  - ☐ has been previously submitted under 35 U.S.C. 154(d)(4).
- ☒ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))
  - ☒ are attached hereto (required only if not communicated by the International Bureau).
  - ☐ have been communicated by the International Bureau.
  - ☐ have not been made; however, the time limit for making such amendments has NOT expired.
  - ☐ have not been made and will not be made.
- ☒ An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).
- ☒ An unsigned oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).
- ☐ An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).

**Items 11 to 20 below concern document(s) or information included:**

- ☒ An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
- ☐ An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
- ☐ A preliminary amendment.
- ☐ An Application Data Sheet under 37 CFR 1.76.
- ☐ A substitute specification.
- ☐ A power of attorney and/or change of address letter.
- ☐ A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.
- ☐ A second copy of the published International Application under 35 U.S.C. 154(d)(4).
- ☐ A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).
- ☒ Other items or information: Return Receipt Postcard; International Search Report (4 pages); Japanese Language International Preliminary Examination Report (6 pages); PCT Request (5 pages)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             |                                                                               |                                                                                                                                                                          |                                        |          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------|
| U.S. APPLICATION NO. (if known, see 37 CFR 1.51)<br><b>10/518602</b><br><small>Not to be assigned</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                             | INTERNATIONAL APPLICATION NO.<br>PCT/JP03/07676                               |                                                                                                                                                                          | ATTORNEY'S DOCKET NUMBER<br>U1927.0014 |          |
| 21. The following fees are submitted:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                             |                                                                               |                                                                                                                                                                          |                                        |          |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | a) Basic national fee ..... | \$300.00                                                                      | \$                                                                                                                                                                       | 300.00                                 |          |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | b) Examination fee .....    | \$200.00                                                                      | \$                                                                                                                                                                       | 200.00                                 |          |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | c) Search fee .....         | \$500.00                                                                      | \$                                                                                                                                                                       | 500.00                                 |          |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                               |                                                                                                                                                                          | <b>\$1000.00</b>                       |          |
| <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |                                                                               |                                                                                                                                                                          |                                        |          |
| Total Sheets                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Extra sheets                | Number of each additional 50 or fraction thereof (round up to a whole number) | RATE                                                                                                                                                                     |                                        |          |
| 37 - 100 =                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | /50 =                       |                                                                               | x \$250.00                                                                                                                                                               |                                        |          |
| Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                             |                                                                               |                                                                                                                                                                          | \$                                     |          |
| <b>CLAIMS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>NUMBER FILED</b>         | <b>NUMBER EXTRA</b>                                                           | <b>RATE</b>                                                                                                                                                              |                                        |          |
| Total claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 54 - 20 =                   | 34                                                                            | x 50.00                                                                                                                                                                  | \$                                     | 0.00     |
| Independent claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 8 - 3 =                     | 5                                                                             | x 200.00                                                                                                                                                                 | \$                                     | 0.00     |
| MULTIPLE DEPENDENT CLAIM(s) (if applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                             |                                                                               | +                                                                                                                                                                        | \$                                     |          |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                               |                                                                                                                                                                          | \$                                     | 1,000.00 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                               |                                                                                                                                                                          | \$                                     |          |
| <b>SUBTOTAL =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                             |                                                                               |                                                                                                                                                                          | \$                                     | 1,000.00 |
| Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                               |                                                                                                                                                                          | +                                      | \$       |
| <b>TOTAL NATIONAL FEE =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                             |                                                                               |                                                                                                                                                                          | \$                                     | 1,000.00 |
| Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |                                                                               |                                                                                                                                                                          | +                                      | \$       |
| <b>TOTAL FEES ENCLOSED =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                               |                                                                                                                                                                          | \$                                     | 1,000.00 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             |                                                                               |                                                                                                                                                                          | Amount to be refunded:                 | \$       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             |                                                                               |                                                                                                                                                                          | Amount to be charged:                  | \$       |
| <p>a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50-2215</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input checked="" type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. <b>Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038.</p> |                             |                                                                               |                                                                                                                                                                          |                                        |          |
| <p><b>NOTE:</b> Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the International Application to pending status.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                             |                                                                               |                                                                                                                                                                          |                                        |          |
| <p>SEND ALL CORRESPONDENCE TO:</p> <p>Steven I. Weisburd<br/>DICKSTEIN SHAPIRO MORIN &amp; OSHINSKY LLP<br/>1177 Avenue of the Americas<br/>41st Floor<br/>New York, New York 10036-2714<br/>(212) 896-5470<br/>CUSTOMER NUMBER: 32172</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |                                                                               | <p>SIGNATURE: <br/>Michael J. Scheer<br/>NAME<br/>34,425<br/>REGISTRATION NUMBER</p> |                                        |          |

10/518602

JT12 Rec'd PCT/PTO 17 DEC 2004

Application No. (if known): Not Yet Assigned

Attorney Docket No.: U1927.0014

**Certificate of Express Mailing Under 37 CFR 1.10**

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Charge \$1,000.00 to credit card

Transmittal Letter to the United States Designated-Elected Office (2 pages)

English language translation of the International Application (37 pages)

Formal Drawings (15 figures, 15 sheets)

Unsigned Oath or Declaration of the Inventors (2 pages)

IDS (4 pages) &amp; PTO-SB/08 (1 page) &amp; International Search Report (4 pages) &amp; Copies of Five Cited References

Japanese Language International Preliminary Examination Report (6 pages)

Amendments to the claims of the International application (18 pages)

English language translation of the amendments to the claims (16 pages)

Copy of International Application WO 03/107431 A1

PCT Request (5 pages)